Name In Full

Certificate of Death

Martha Ann Boswell

Died at Town Ashton — County Montgomery MARYLAND

Date 1899 Month Nov. Day 24 | Age Y. 76 M. D. | Native of | Occupation Housekeeper

~~Male~~ Female | White | ~~Colored~~ | ~~Married~~ | ~~Single~~ | Widow | ~~Widower~~ | ~~Divorced~~

Number of children living 4

~~Husband~~ Wife of Judson Boswell

Father's Name Geo. H. Boswell | Mother's Maiden Name Mary A. Boswell

Cause of Death: Primary Pneumonia 72 | How long sick 3 weeks

Immediate | Accident, Suicide, Homicide

Reported by P. Dr. Dr. L. Cissell

Address Highland, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70999

Name In Full

Certificate of Death

Walter Vernon Bowman

Died at Town: Unity County: Montgomery MARYLAND

Date 1899 Month: Nov Day: 23 | Age Y. 2 M. 6 D. | Native of Md | ~~Occupation~~

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ | ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Wm. Vernon Bowman

Mother's Name Edith Mary Bowman

Cause of Death — Primary: 146a

How long sick: 4 Hours

Death — Immediate: Burned

Accident, ~~Suicide~~, ~~Homicide~~

Reported by G. W. Cashell Undertaker

Address Unity Montgomery County Md

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. Dyson

of Laytonsville Md

Seen by Coroner

of

Information contained in this certificate received

from Editha May Bowman

of unity Md

Name in Full Jane Davis — Certificate of Death

Died at Town Poolesville County Montgomery MARYLAND

Date 189 Month Nov. Day 13 | Age Y. 47, M. D. | Native of Md., | Occupation Housewife

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 14

~~Husband~~ Wife of Perry Davis 97

Father's Name | Mother's Name

Cause of Death { Primary Bright Disease Chronic | How long sick 7 months

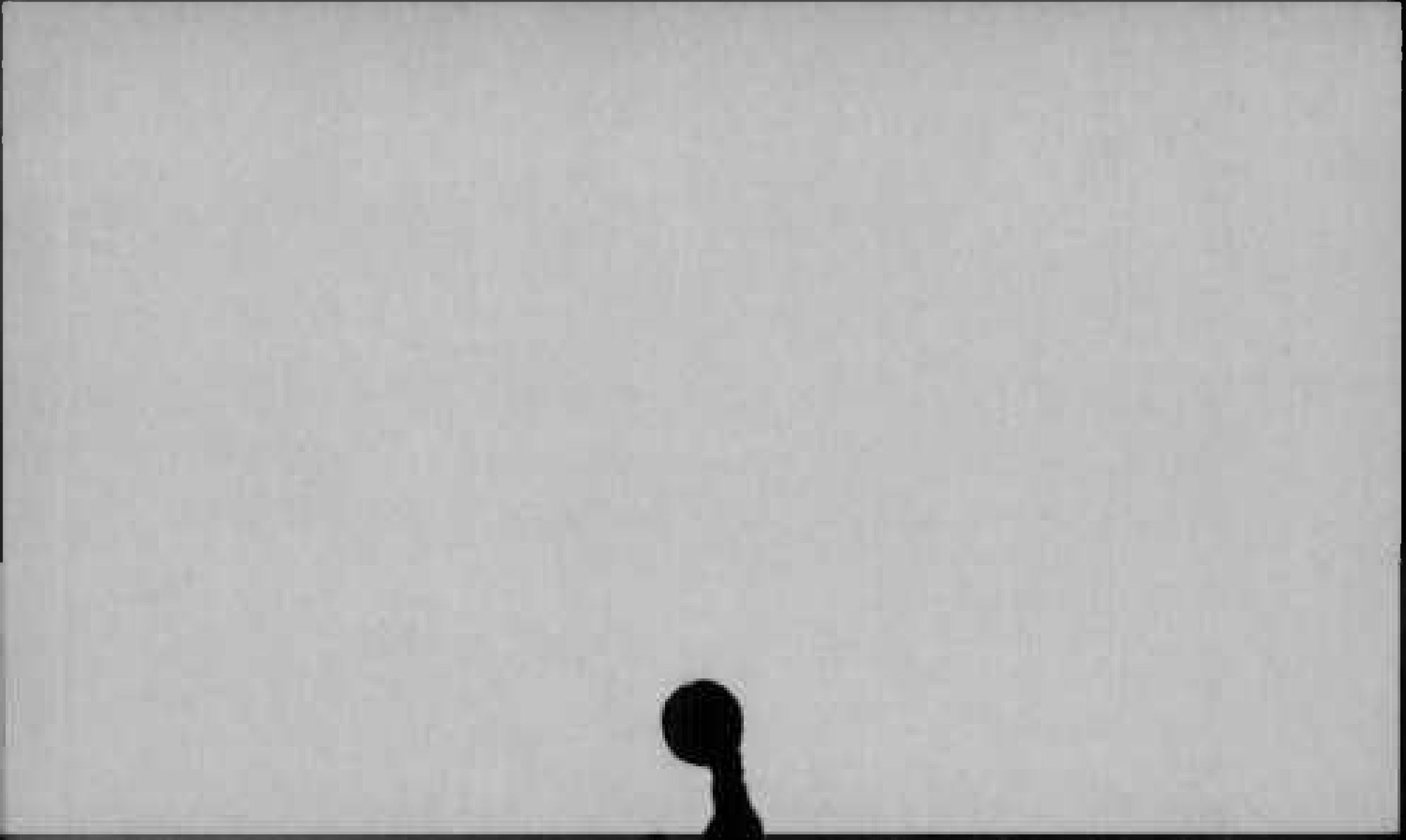
Immediate Apoplexy | ~~Accident, Suicide, Homicide~~

Reported by Dr. H. Walling M.D.

Address Poolesville. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON



Name in Full

Lila Dorsey

Certificate of Death

Died at Town: Brookeville County: Montgomery MARYLAND

Date 189? Month: 11 Day: 30 | Age Y.: 5 M.: — D.: — | Native of: Md | Occupation: —

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of —

Father's Name: Jno. Dorsey

Mother's Name: Mary Dorsey

Cause of Death — Primary: Diphtheria & Cr — How long sick: 11 days

Immediate: Sudden heart failure — ~~Accident, Suicide, Homicide~~

Reported by: Dr. W. F. Green

Address: Brookeville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70706

Name In Full — Certificate of Death

Preston M. English

Died at — Town: Gaithersburg — County: Montgomery — MARYLAND

Date 189[illegible] — Month: Nov. — Day: 15 — Age: Y. 17 M. D. — Native of: Maryland — Occupation: School boy

Male ~~Female~~ — White ~~Colored~~ — ~~Married~~ Single — ~~Widow~~ ~~Widower~~ — ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

22a

Father's Name: William G. English — Mother's Name: Elizabeth L. English

Cause of Death — Primary: Tuberculous Phthisis — How long sick: one year

Immediate: Tuberculous Phthisis — Accident, Suicide, Homicide

Reported by: E. C. Etchison

Address: Gaithersburg, Montgomery, Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70888

Name in Full

Certificate of Death

Eugene Edwin Jarboe

Died at Town: Edwards Ferry County: Montgomery MARYLAND

Date 1899 Month: Nov Day: 19 | Age Y. 53. M. 2 D. 5 | Native of Md | Occupation Farmer

~~Male~~ / ~~Female~~ White / ~~Colored~~ Married / ~~Single~~ Widow / Widower ~~Divorced~~ Number of children living 7

Husband / Wife of Mary E Jones

Father's Name Samuel Jarboe Mother's Name Maria Gibson

Cause of Death: Primary Cholera Morbus — How long sick 24 hours

Immediate Heart failure 12a — ~~Accident, Suicide, Homicide~~

Reported by Richard F Gott M D

Address Poolesville Md.

Must be signed by physician, if any in attendanco, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Neme in Full

Certificate of Death

Mary Keys

Died at Town: Olney County: Montgomery MARYLAND

Date 1899 Month: Mar Day: 12	Age Y.: 3 M.: D.:	Native of: Olney	Occupation:

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ Number of children living

Husband / Wife of

Father's Name: Fred. Keys

Mother's Name: Elsie Keys

Ceuse of Death — Primary: Inflamation Intestines — How long sick: 7 days

Immediate: Adynamia

83

Accident, Suicide, Homicide

Reported by: Edear. Farquhar

Address: Olney Maryland.

Must be signed by physician, if any in ettendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 78706

Name in Full

Certificate of Death

(—) Martin

Died at Town: Rockville County: Montgomery MARYLAND

Date 189 9 Month: Nov. Day: 8th Age: Y. — M. — D. 2 Native of: Md. Occupation: —

Male ~~Female~~ Colored Married Single Widow Widower Divorced Number of children living

Husband of X

Wife

Father's Name: David Martin Mother's Name: Gertrude Martin

Cause of { Primary: 161 Bowel Bleed

Cause of { Secondary:

How long sick: X

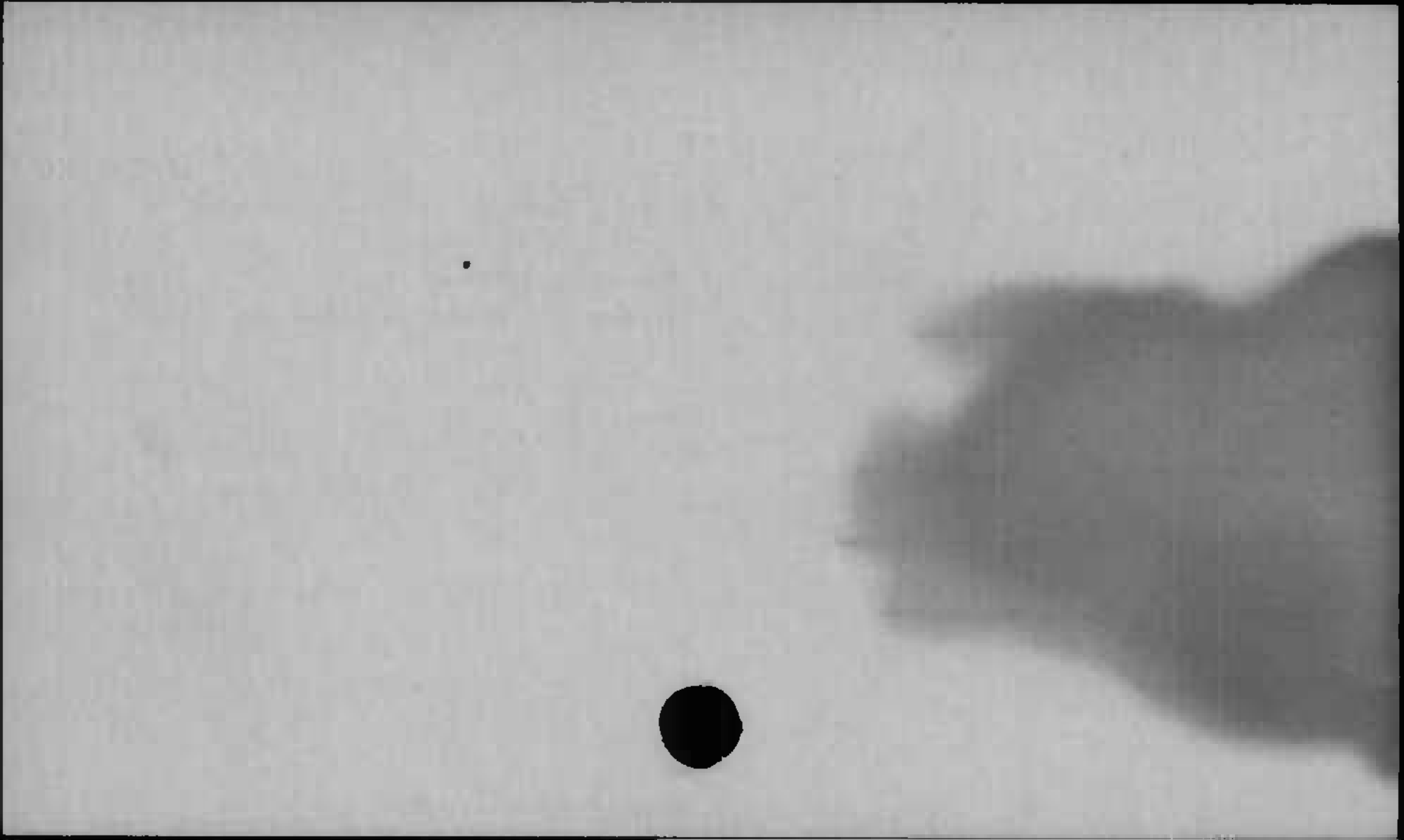
Accident, Suicide, Homicide

Received by: O. M. Linthicum M.D.

Address: Rockville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM



Name in Full Annie Offutt — Certificate of Death

Died at Town Rockville, County Montgomery Co., MARYLAND

Date 189[illegible] Month Nov Day 2 | Age Y. 14 M. 6 D. 19 | Native of Rockville | Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband / Wife X of

Father's Name Joseph Smith

Mother's Name Martha Jane Hall

Cause of Death — Primary: Tubercular peritonitis — How long sick 1 or 2 years

Immediate: Heart failure

~~Accident, Suicide, Homicide~~

Reported by W. R. Andrews, M.D.

Address Rockville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU Form 666

Name In Full Bradley Watkins — Certificate of Death

Died at Town Ridgeville, County Montgomery — MARYLAND

Date 1899 Month Nov. Day 24 | Age Y. 22 M. 7 D. 14 | Native of Maryland | Occupation Farmer

Mele ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of Wife

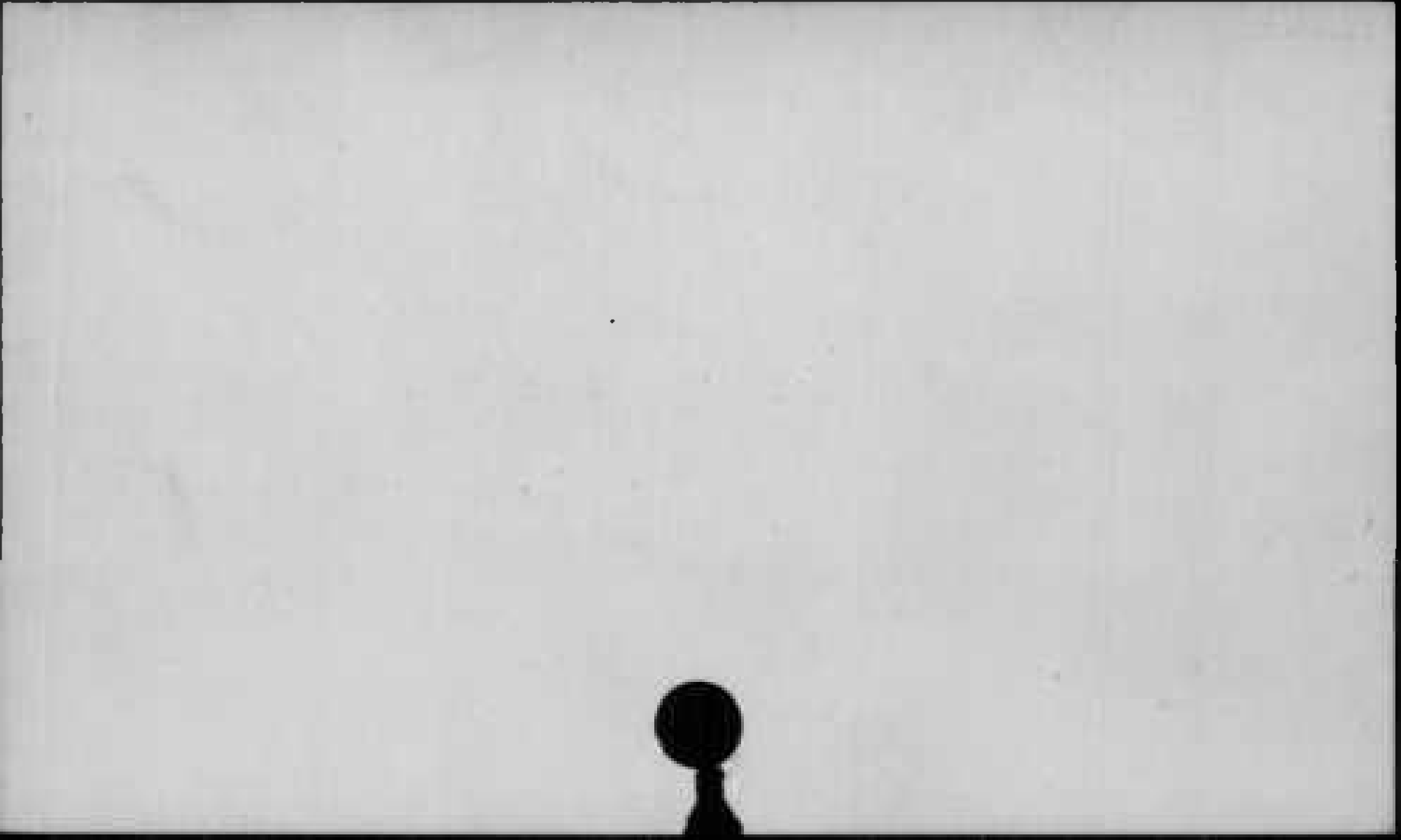
Father's Name Hank Watkins — Mother's Name

Cause of Death — Primary Enteric Fever — How long sick 3 Weeks

Immediate Enteric Fever — Accident, Suicide, Homicide

Reported by E. L. Etchison

Address Gaithersburg Mont'g. Co. Md.

Must be signed by physician, if eny in attendance, otherwise coroner, underteker or minister.

LIBRARY BUREAU, 78995